

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

OCT 3 1 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s):	Donald J. Pfundstein, Lisa K. Sh	Donald J. Pfundstein, Lisa K. Shapiro, Ph.D.; Paul A. Worsowicz		
II. Name of Lobbyist's pa	rtnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN of 214 North Main Street, Co			
603-228-118	1 603-226-3334	shapiro@gcglaw.com		
(Telephone)	(Fax)	(Email)		
III. This statement covers reportable expense transa	s: (Choose one – file separate reports for ctions which are not attributable to any	each client, OR you may file a separate report for one client.)		
All reportable transa	actions occurring in the month prior to the	reporting date relative to the following client.		
	CAMPAIGN FOR A FAMILY FI	RIENDLY ECONOMY		
	Full Name of Client as it appears on the Lo	bbyist Registration Form)		
All reportable transa unrelated to any par		ist's family), or the lobbying firm listed below which are		
IV. Date of Report:	April 25, 2018 🔲	July 25, 2018 🔲		
Reports cover: activity	y from date of registration to 3/31/18	activity from 4/1/18 to 6/30/18		
	October 31, 2018	January 30, 2019 □		
activ	pity from 7/1/18 to 9/30/18	activity from 10/1/18 to 12/31/18		
	s received and no reportable transaction lete just this form and submit it to the Secre	s made since the last report. Etary of State's Office, State House, Room 204,		
VI. Check if additional relationships If you have received	eports are attached: I fees or made expenditures, you must file A	Addendum A – Fees and Expenses		
If you have paid an Expense Reimburse		ust file Addendum B - Report of Honorariums or		
If you, your firm, or	your family has made political contributio	ns, you must file Addendum C - Political Contribution		
Sworn Statement/Affirma	tion by Lobbyist			
		m that the foregoing information is true and complete		
to the best of my knowledge	e and belief.			
1245-		10-22-18		
(Signature of Lobbyist)	-	(Date)		
(4.8		ζ=/		
Lisa K. Shapiro, Ph.D.				
(Print Name of Johnvist)				



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	aul A. V	Vorsowicz	
II. Name of lobbyist's partnership, firm or corporation, if any:			
GALLAGHER, CALLAHAN & GARTREI	J. P.C		
(Name of partnership, firm or corporatio			
III. Name of Client CAMPAIGN FOR A FAMILY FRIENDLY ECONOMY	Date	October 3	1, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above th lobbying, including fees for services such as public advocacy, government relat including research, monitoring legislation, and related legal work. The gross fe by any expenses:	ions, or	public relatio	ns services,
a) Total of all fees received in this reporting period		a) \$.00.
b) Total of all fees received this calendar year, prior to this reporting period. (This should equal the total prior monthly reports for this calendar year.)		b) \$	62,500.00
c) Total of all fees received to date. (Add lines a and b)		c) \$	62,500.00
d) Indicate the amount of any such fees that are due, but have not yet been paid.		d) \$.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each clie lobbyist(s)/firm that are unrelated to any one client a separate report may be fiare to be reported in one of three categories of expenses: (a) the aggregate reporting period for salaries, benefits, support staff, and office expenses; (b) expenses where the expenditure was of \$25.00 or less (for example: meals put the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that purchase of a ceremonial object given to a person being lobbied with a value of statement of each individual expenditure made during this reporting period of g covered by (a) (for example: purchase of a meal with value of greater than \$25 given to the subject of lobbying with a value greater than \$25, but not greate legislative reception). Expenses for honorariums, expense reimbursement, or pon separate addendums and should not be reported on Addendum A.	ent and in led for to total on the aggrehased it is give of \$25.00 reater the purchaser than \$5	f expenditure he lobbyist(s f all expense gregate total during a busi in to the pers or less); an ian \$25.00 fo se of a cerem \$50, restaura	s are made by the)/firm. Expenses s paid during the of all individual ness lunch where on being lobbied, id (c) an itemized r any purpose not onial object to be nt expenses for a
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ b) \$.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	c) \$.00
c) Total of all itemized expenditures reported in detail in section VI.			.00

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: CAMPAIGN FOR A FAMILY FRIENDLY ECONOMY		
d) Total expenses for this reporting period. (Add lines a, b and c.)	d)	\$00
e) Total of expenses paid this calendar year, prior to this reporting period. (This should be the amount on line f of addendum A for last month's report.)	e)	\$50,000.00
f) Total of all expenses year to date.	f)	\$50,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during	g this reporting
Paid to:		Amount
	<u>\$</u>	
	\$	
	\$	
	\$ \$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoi	ng information
カスト.	(Date)	3
(Signature of lobbyist)	(Date)	
Lisa K. Shapiro, Ph.D. (Print Name of Lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

	Affirmation by Lobbyist ne and Expenses for:		
Name of Lobbying p	partnership, firm or corpo	ration: GALLAGHER, CAI	LLAHAN & GARTRELL, P.C.
Name of Client (leav particular client):	ve blank if Statement is fo Campaign for a Famil		rporation and not related to any
Date of Report (che	ck one):		
April 25, 2018 🗆	July 25, 2018 □	October 31, 2018	January 30, 2019 □
		e Statement of Income and Exatement (insert the number of	xpenses described above, and the Addendum forms being
1 Addendum A(s).		
0 Addendum B(s).		
0 Addendum C(s).		
	irm that the foregoing into		nd each Addendum is true and
(Signature of Loobly	Jun is)		10 / 18 / 18 (Date)
Donald J. Pfundstei (Print Name of lobb			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Aff Statement of Income			
Name of Lobbying par	tnership, firm or corpor	ration: GALLAGHER, CAL	LAHAN & GARTRELL, P.C.
Name of Client (leave particular client):	blank if Statement is fo Campaign for a Famil	or the partnership, firm, or cor y Friendly Economy	poration and not related to any
Date of Report (check	one):		
April 25, 2018 🗆	July 25, 2018 🗆	October 31, 2018	January 30, 2019 □
I have read RSA 15, R following Addendums submitted):	SA 15-B, RSA 664, the submitted with that Sta	Statement of Income and Extement (insert the number of	penses described above, and the Addendum forms being
1 Addendum A(s).			
0 Addendum B(s).			
0 Addendum C(s).			
I hereby swear or affire complete to the best of			d each Addendum is true and
Saul qu	Vorsonie		10-18-1p
(Signature of Lobbyist			(Date)
Paul A. Worsowicz			
(Print Name of lobbyi	St)		